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CLINICAL VIDEO

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Ataxic gait

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Abstract

Ataxia as the main complaint in a young patient prompts to diagnose neurodegenerative diseases. Not all ataxias are irreversible. We present a video of a patient in the clinic with ataxia diagnosed as subacute combined degeneration of the cord.

FIGURE 1 Sagittal T2-weighted images reveal an intraspinal hyperintensity of the cervical and thoracic spinal cord with no mass effect

The young man presented with unsteadiness, lethargy, and tingling for 3 months. He was pale with cognitive impairment (Montreal Cognitive Assessment score 25/30). He underscored in repeating the digits backward, serial seven subtraction, and delayed recall. He had ataxic gait, increased deep tendon reflexes, bilateral positive Babinski, impaired vibration and joint position sense, and positive Romberg's sign (Video S1). He had macrocytic anemia, low serum B12, positive intrinsic factor, and anti-parietal antibodies. MRI is described in Figure 1. Therefore, sensory ataxia due to subacute combined degeneration of the cord and pernicious anemia was diagnosed. He improved with B12 therapy.[1] Video S2.

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CONFLICT OF INTEREST

None declared.

AUTHOR CONTRIBUTIONS

SB wrote the draft of the paper. TAHTKA helped in the management of the patient. The images were contributed by VP. All authors reviewed and edited the paper and approved the final version of the paper.

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ETHICAL APPROVAL

Ethics approval was waivered by the Thomson Hospital Kota Damansara Ethics Committee due to the nature of the manuscript (ie, case report). The manuscript DOES NOT report on any animal data or tissue.

INFORMED CONSENT

Written informed consent was obtained from the patient for their information to be published in this article.

DATA AVAILABILITY STATEMENT

The data that support the findings of this study are available from Thomson Hospital Kota Damansara, but restrictions apply to the availability of these data, which were used under license for the current study, and so are not publicly available. Data are however available from the authors upon reasonable request and with permission of Thomson Hospital Kota Damansara.

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SUPPORTING INFORMATION

Additional supporting information may be found online in the Supporting Information section.

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